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⊏ ໝ	Please type a plus sign (+) in	•	U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE →				
יי י <i>טר</i>			Attorney Docket No. TSS-017 CN				
d		TILITY	12 211				
1		APPLICATION	First Inventor BCII 3				
	IRAN	ISMITTAL	Title Bone Precursor Composition				
	(Only for new nonprovisions	al applications under 37 CFR 1.53(b))	Express Mail Label No.				
		TION ELEMENTS	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application				
L		erning utility patent application contents.					
	Submit an original and a di Applicant claims sn See 37 CFR 1.27. Specification (preferred arrangement s	Inall entity status. [Total Pages	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. Assignment Papers (cover sheet & document(s)) 37 CFR 3.73(b) Statement (when there is an assignee)				
	b. Copy from a (for continuat i. DELET) Signed stat named in the 1.63(d)(2) a	I Total Sheets [Total Pages [Total Pages Ited (original or copy) prior application (37 CFR 1.63 (d)) icon/divisional with Box 18 completed) ION OF INVENTOR(S) tement attached deleting inventor(s) he prior application, see 37 CFR and 1.33(b). Sheet. See 37 CFR 1.76	11. English Translation Document (if applicable) 12. Information Disclosure Statement (IDS)/PTO-1449 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. Other: See Comment (if applicable) Copies of IDS Citations Cita				
ŀ	18. If a CONTINUING APPLIC	CATION, check appropriate box, and su	upply the requisite information below and in a preliminary amendment,				
	or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of pnor application No.: 09 / 369, 012 Prior application information: Examiner Ito prior application information: Examiner Ito prior application from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.						
		19. CORRESPON	NDENCE ADDRESS				
	Customer Number or Bar Co	ode Label (Insert Customer No. or Attach	or Correspondence address below				
	Name	Ellen Leonn	119				
		TEI BIOSCIE					
	Address	7 Elkins St	treet				
	City	Boston	State MA Zip Code 02127				
	Country	USA T	Telephone (017-268-1616 **Fax*)				
	Name (Print/Type)	Ellen Leonni					
	Signature	Ellen Leor	nue Date 5/29/01				
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Burden Hour Statement This form is estimated to take 0.2 hours to complete. Time will(var) depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to re-

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$)	į	356

Complete if Known				
Application Number	/			
Filing Date				
First Named Inventor	Bell			
Examiner Name	Hope Robinson			
Group Art Unit	1653			
Attorney Docket No.	TSS-017(N	_		

METHOD OF PAYMENT	FEE CALCULATION (continued)			
The Commissioner is hereby authorized to charge	3. ADDITIONAL FEES			
indicated fees and credit any overpayments to.	Large Small			
Deposit Account	Entity Entity Fee Fee Fee Fee Descript	ion Fee Paid		
Number	Fee Fee Fee Fee Fee Descript Code (\$) Code (\$)	JOH TEET AIU		
Deposit Account	105 130 205 65 Surcharge - late filing fee o	r oath		
Name	127 50 227 25 Surcharge - late provisional	I filing fee or		
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	cover sheet			
Applicant claims small entity status.	139 130 139 130 Non-English specification			
See 37 CFR 1.27	147 2,520 147 2,520 For filing a request for ex p	arte reexamination		
2. Payment Enclosed:	112 920* 112 920* Requesting publication of S	SIR prior to		
∇ Check	Examiner action 113 1,840* 113 1,840* Requesting publication of S	SIR after		
FEE CALCULATION	113 1,840* 113 1,840* Requesting publication of S Examiner action			
1. BASIC FILING FEE	115 110 215 55 Extension for reply within f	first month		
Large Entity Small Entity	116 390 216 195 Extension for reply within s	second month		
Fee Fee Fee Fee Description	117 890 217 445 Extension for reply within t	hird month		
Code (\$) Code (\$)	118 1,390 218 695 Extension for reply within f	ourth month		
TI (128 1,890 228 945 Extension for reply within f	ifth month		
106 320 206 160 Design filling fee	119 310 219 155 Notice of Appeal			
108 710 208 355 Reissue filing fee	120 310 220 155 Filing a brief in support of a	an appeal		
114 150 214 75 Provisional filing fee	121 270 221 135 Request for oral hearing			
	138 1,510 138 1,510 Petition to institute a public	use proceeding		
SUBTOTAL (1) (\$) 7 1 0	140 110 240 55 Petition to revive - unavoid	able		
2. EXTRA CLAIM FEES	141 1,240 241 620 Petition to revive - unintent	tional		
Extra Claims <u>below</u> <u>Fee Paid</u>	142 1,240 242 620 Utility issue fee (or reissue	*)		
Total Claims 47 -20** = 21 × 19 = 486	143 440 243 220 Design issue fee			
Independent S - 3** = 2 X 90 = 160	144 600 244 300 Plant issue fee			
Multiple Dependent	122 130 122 130 Petitions to the Commission			
	123 50 123 50 Processing fee under 37 C			
Large Entity Small Entity Fee Fee Fee Fee Fee Description	126 180 126 180 Submission of Information	Disclosure Stmt		
Code (\$) Code (\$)	581 40 581 40 Recording each patent as property (times number of			
103 18 203 9 Claims in excess of 20 102 80 202 40 Independent claims in excess of 3	146 710 246 355 Filing a submission after fi	nal rejection		
102 80 202 40 Independent claims in excess of 3 104 270 204 135 Multiple dependent claim, if not paid	(37 CFR § 1.129(a))			
109 80 209 40 ** Reissue independent claims over original patent	149 710 249 355 For each additional invented examined (37 CFR § 1.12	tion to be 29(b))		
	179 710 279 355 Request for Continued Ex	amination (RCE)		
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	169 900 169 900 Request for expedited ex- of a design application	amination		
SUBTOTAL (2) (\$) 6 4 6	Other fee (specify)			
**or number previously paid, if greater: For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTO	TAL (3) (\$)		

SUBMITTED BY				Complete (if applicable)		
Name (Print/Type)	Ellen Leonnia	Registration No. (Attorney/Agent)	P- 48,159	Telephone	617-268-1616(*317	
Signature	Flen Leonnie			Date	5129101	

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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CONTINUATION APPLICATION UNDER 37 CFR 1.53(b)

DOCKET NUMBER	ANTICIPATED CLASSIFICATION:	PRIOR APPLICATION SERIAL NUMBER: 09/369,012	PRIOR APPLICATION FILING DATE: August 5, 1999	
TSS-017CN	CLASS: SUBCLASS	EXAMINER: Hope Robinson	ART UNIT: 1653	

Assistant Commissioner for Patents Box Patent Application Washington, DC 20231

CERTIFICATION UNDER 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as "Express Mail Post Office to Addressee" in an envelope addressed to: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231, on the date set forth below.

May 29, 2001

Date of Signature and of Mail Deposit

ET 014051869US

Express Mail Label Number

By: Ellen M. Leonnig
Attorney for Applicant(s)

Dear Sir:

This is a request for filing a continuation application under 37 CFR 1.53(b), of pending prior application serial no. <u>09/369,012</u> filed on <u>August 5, 1999</u>, of <u>Eugene Bell and Tracy M. Sioussat</u> entitled <u>BONE PRECURSOR COMPOSITIONS</u>. The contents of all of the aforementioned application(s) are hereby incorporated by reference.

- 1. Enclosed is a copy of the latest inventor signed application, including the oath or declaration as originally filed. The copy of the enclosed papers is as follows:
 - 44 page(s) of specification;
 - 6 page(s) of information disclosure statement and supplemental information disclosure statement;
 - 6 page(s) of declaration and previous powers of attorney; and
 - 4 page(s) of amendments to claims;

I hereby verify that the attached papers are a true copy of the prior complete application serial no. <u>09/369,012</u> as originally filed on <u>August 5, 1999</u>.

el3901

- 2. The fee for filing this continuation application, as set forth in 37 CFR 1.16 is \$1,356.00; the fee was calculated as follows: \$710.00 is basic fee for a non-small-entity under 37 CFR 1.16(a); 160.00 is fee for 2 independent claims in excess of 3 under 37 CFR 1.16(b); and \$486.00 is fee for 27 claims in excess of 20 under 37 CFR 1.16(c).
- 3. A check in the amount of \$1,356.00 is enclosed for payment of the filing fee.
- 4. Cancel in this application original **claims 11-14 and 17** before calculating the filing fee.
- 5. A preliminary amendment is enclosed.
- 6. Amend the specification by inserting before the first line the sentence: "This application is a continuation application of serial no. 09/369,012 filed on August 5, 1999. The contents of all of the aforementioned application(s) are hereby incorporated by reference."
- 7. The provisional application of the prior application, serial no. 60/095,627, was assigned of record to **Tissue Engineering, Inc.** (Reel/Frame 9697/0318). A copy of the document effecting applicant's change of name to **TEI Biosciences, Inc.** is enclosed.
- 8. The powers of attorney in the prior application were to **Thomas V. Smurzynski** et al. The previous powers of attorney were revoked, and a new power of attorney was executed. A copy of the change of power of attorney to **Ellen M.** Leonnig is enclosed.

9. Address all future communications to **Ellen M. Leonnig, Esq.** at the following address:

TEI Biosciences, Inc. 7 Elkins Street Boston, MA 02127

and direct telephone calls to Ellen M. Leonnig at (617) 268-1616 (ext. 217).

Respectfully submitted, TEI BIOSCIENCES, INC.

Ellen M. Leonnig, Esq.
Provisional Reg. No. P-48,159
Attorney for Applicant(s)
(37 CFR 1.34(a))

7 Elkins Street Boston, MA 02127 Tel. (617) 268-1616 (ext. 217)

Enclosures